9/25/2020

Division of Corporations

Electronic Filing Cover Sheet

nuge and use it as a cover sheet. Type the fax audit number

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H20000334449 3)))



H200003344493A.EC\$

To:			,
	Division of Cor	rporations	
	Fax Number	: (850)617-6381	
			<u>, -</u> .
From:			- 12
	Account Name	: EXPRESS CORPORATE FILING SERVICE INC.	
	Account Number	: 120000000146	A > 1-1-7-
	Phone	: (305)444-4994	
	Fax Number	: (305)444-4977	
	Fax Number	: (305)444-49//	

FLORIDA LIMITED LIABILITY CO. BLUE ROOF INVESTMENTS GROUP LLC

Certificate of Status	0
Certified Copy	<u> </u>
Page Count	03
Estimated Charge	\$155.00

2020 SEP 25 PH 4: 1

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY.

ARTICL	E I -	Name:
--------	-------	-------

The name of the Limited Liability Company is:

BLUE ROOF INVESTMENTS GROUP LLC

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	Maning Adoress:
1713 SW 9th STREET	1713 SW 9th STREET
MIAMI, FL 33135	MIAMI, FL 33135
	<u> </u>

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

LUIS ALBERTO PL	EREZ	
	Name	
1713 SW 9th STREI	er	
Florida street addre	ss (P.O. Box <u>NOT</u> ac	ceptable)
міамі	FL	33135
City	State	Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company a: the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act to this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

|a| Luia Alberto Perez Registered Agent's Signature (REQUIRED)

(CONTINUED)

FILED 2020 SEP 25 PM 4:17 ARTICLE IV-

<u>Title:</u>	Name and Address:
"AMBR" = Anthorized Member	
"MGR" = Manager	Civil at Departs beings
AMBR	LUIS ALBERTO PEREZ 1713 SW 9th STREET
	MIAMI, FL 33135
AMBR	LEYDIS CANCHILA
<u> 132,171,112 </u>	1713 SW 9th STREET MIAMI, FL 33135
	MIANN, FL 33103
(Use attachment if necessary)	
TLEV: Effective date, if other than	the date of filing: (OPTIONAL)
CLEV: Effective date, if other than effective date is listed, the date mute of filing.)	st be specific and cannot be more than five business days prior to or 90 days after
CLEV: Effective date, if other than effective date is listed, the date mute of filing.)	st be specific and cannot be more than five business days prior to or 90 days after less not meet the applicable statutory filing requirements, this date will not be listed a
CLEV: Effective date, if other than effective date is listed, the date mute of filing.) If the date inserted in this block decument's effective date on the Dept.	st be specific and cannot be more than five business days prior to or 90 days after less not meet the applicable statutory filing requirements, this date will not be listed a
CLEV: Effective date, if other than effective date is listed, the date mute of filing.) If the date inserted in this block de	st be specific and cannot be more than five business days prior to or 90 days after less not meet the applicable statutory filing requirements, this date will not be listed a
CLEV: Effective date, if other than effective date is listed, the date mute of filing.) If the date inserted in this block decument's effective date on the Dept.	st be specific and cannot be more than five business days prior to or 90 days after less not meet the applicable statutory filing requirements, this date will not be listed a artiment of State's records.
CLEV: Effective date, if other than effective date is listed, the date mute of filing.) If the date inserted in this block decument's effective date on the Dept.	st be specific and cannot be more than five business days prior to or 90 days after less not meet the applicable statutory filing requirements, this date will not be listed a artiment of State's records.
CLE V: Effective date, if other than effective date is listed, the date mute of filing.) If the date inserted in this block decument's effective date on the Deptement's effective date on the Deptement's effective date on the REQUIRED SIGNATURE:	st be specific and cannot be more than five business days prior to or 90 days after the applicable statutory filing requirements, this date will not be listed antiment of State's records.
CLE V: Effective date, if other than effective date is listed, the date muste of filing.) If the date inserted in this block decument's effective date on the Deptement's effective date on the Deptement of the	is the specific and cannot be more than five business days prior to or 90 days after the specific and cannot be more than five business days prior to or 90 days after the specific and cannot be listed and the state of State's records. Alberta Paraz of a member or an authorized representative of a member.
CLE V: Effective date, if other than effective date is listed, the date muste of filing.) If the date inserted in this block decument's effective date on the Deptement's effective date on the Deptement of the	is the specific and cannot be more than five business days prior to or 90 days after the specific and cannot be more than five business days prior to or 90 days after the specific and cannot be listed and the state of State's records. Alberta Paraz of a member or an authorized representative of a member. is executed in accordance with section 605.0203 (1) (b), Florida Statutes.
CLE V: Effective date, if other than effective date is listed, the date muste of filing.) If the date inserted in this block decument's effective date on the Dept CLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature This document is an aware that	is the specific and cannot be more than five business days prior to or 90 days after the specific and cannot be more than five business days prior to or 90 days after the specific and cannot be listed and the state of State's records. Alberta Paraz of a member or an authorized representative of a member.
CLE V: Effective date, if other than effective date is listed, the date muste of filing.) If the date inserted in this block decument's effective date on the Deptement's effective date on the Deptement of the	of a member or an authorized representative of a member. is executed in accordance with section 605.0203 (1) (b), Florida Statutes. any false information submitted in a document to the Department of State.

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)